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ABSTRACT

This report describes the characteristics and activities of family day care networks and their role in providing professional support to family day care providers. The introduction explains the rationale for these networks and focuses on the work conducted by Child Care, Inc., in New York City, to develop them. Chapter 2 provides a background to family day care networks by elaborating and differentiating among other strategies that also seek to promote professionalism in family day care. The efforts undertaken by Child Care, Inc., to develop the networks is described in chapter 3. These methods involve choosing neighborhoods, identifying organizations that would sponsor the networks, and designing a network development package that will guide the organization in establishing the network. Chapter 4 provides a detailed account of the structure of the networks, their purposes, and the variety of services they provide. The perspective of the providers is taken into consideration in chapter 5, which answers questions such as: Why did the providers join networks?; What services did they expect to receive?; and Why did they decide to become certified or registered? Chapter 6 discusses four factors that influence the success and viability of family day care networks: (1) training and regulation of providers; (2) size and scope of networks; (3) stable funding; and (4) education of parents and public. The report concludes with the view that community-based networks are a promising mechanism for assisting with new and experienced child care providers. (BAC)

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A Study of Child Care, Inc.'s Neighborhood Child Care Initiatives Project New York City

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Promoting Professionalism through Family Day Care Networks

A Study of Child Care, Inc.'s
Neighborhood Child Care Initiatives Project
New York City

Mary Larner
Nina Chaudry

August 1993

NATIONAL CENTER FOR CHILDREN IN POVERTY
Columbia University School of Public Health

THE NATIONAL CENTER FOR CHILDREN IN POVERTY (NCCP) was established in 1989 at the School of Public Health, Columbia University. Its goal is to strengthen programs and policies for young children and their families who live in poverty in the United States. The Center seeks to achieve this goal through interdisciplinary analysis and dissemination of information about public and private initiatives in the areas of early childhood care and education, maternal and child health, and the integration of services for young children and their families.

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1

Introduction

Professionals, policymakers, employers, and parents share an interest in knowing that high quality child care is available in centers and home settings. Organization, training, and support all contribute in important ways to the quality of child care. This report examines one model for supporting home-based caregivers, known as family day care providers, through the operation of community-based family day care networks.

Family day care providers offer child care for a small number of children (usually six or fewer) in their homes. Many of these caregivers are attracted to family day care by the opportunity to work independently and earn money, yet they can find themselves isolated at home with children, lacking contact with peers and professional resources in the community. Increasingly, groups interested in improving the quality of child care seek to reach home-based providers, encouraging them to meet state standards and linking them to training and supports that help them maintain their businesses. The family day care network model described in this report is one way to accomplish that goal.

The report describes work in New York City conducted by Child Care, Inc., a child care resource and referral agency serving the city's five boroughs. Through its program and policy work, Child Care, Inc. seeks to improve the quality and expand the supply of child care and early education services available to children throughout New York City. The agency offers consultation and information to parents about making appropriate child care arrangements. In the mid-1980s, the Child Care, Inc. determined that it would be necessary to increase the pool of family day care providers, if they were to respond effectively to the needs of families seeking care for their children.

In 1986, Child Care, Inc. launched its Neighborhood Child Care Initiatives Project to expand the supply and enhance the quality of family day care in New York City. With funding from the American Express Foundation and other donors, the project emphasized efforts to develop and strengthen community-based networks of family day care providers, and it undertook broader initiatives to increase public awareness about family day care and to influence policymaking. The stated objectives of the project were to: expand the supply of licensed family day care for working parents; increase access to care by creating networks of providers; and improve the quality of care by providing support services and training for providers through family day care networks.

In 1992, Child Care, Inc. commissioned the National Center for Children in Poverty (NCCP) to evaluate the family day care work that it had performed through the Neighborhood Child Care Initiatives Project. The American Express Foundation, a major supporter of the initiative, funded the evaluation to learn about the impact of the network development model and its applicability to communities outside New York. NCCP was established at Columbia University's School of Public Health in 1989 to work across disciplines to strengthen programs and policies for young children living in poverty. From 1991 to 1993, the Center's early childhood education program conducted a national study of organizations that support family day care in low-income communities.

The Center's six-month qualitative evaluation focused on the Neighborhood Child Care Initiatives Project's model to help communities establish family day care networks linking providers to training and supports. Data were gathered in several ways to examine the experiences of eight networks in diverse communities around New York City:

- Review of records held at Child Care, Inc., including proposals and reports, files on the networks, and family day care newsletters;
- Interviews with the Child Care, Inc. project director and staff regarding their work with each of the networks, and with funders associated with the American Express Foundation;
- Extensive interviews with each network coordinator and a host agency administrator in eight networks;
- Visits to the homes of one or two providers associated with each network; and
- Telephone interviews with 31 providers chosen at random from lists of current and past network members.

This report draws on the information collected in the course of the NCCP evaluation of Child Care, Inc.'s work. It describes for a general audience the characteristics and activities of family day care networks.

Networks are only one of several approaches that have been developed across the United States to promote safety and quality in family day care homes. Public education activities, recruitment campaigns, and training programs for providers who see themselves as professionals are common, but they are short-term and have a limited impact on individual providers. Efforts to organize providers into groups that give them access to ongoing support include: family day care systems operated by agencies that serve subsidized children, and professional associations established by providers to address common goals. The systems train providers extensively, place children, and handle payments, but many providers find their structures overly controlling. The associations offer peer support, a professional identity, and political strength, but they seldom have paid staff who can offer labor-intensive services like home visits and parent referrals.

Family day care networks typically employ a coordinator to organize training and offer assistance to participating independent providers. Networks build the local supply of family day care by recruiting new providers, helping them open businesses, offering training, making home visits, linking them to resources, and sharing information with them. In addition, many networks refer parents who need child care to the network providers, and some help resolve communication problems between parents and providers. A common thread through nearly all network activities is an emphasis on the professionalism of family day care work. Providers, parents, and community leaders see networks as evidence that family day care is a serious business that demands skill and deserves respect. The New York City experience described in this report suggests that family day care networks are strongest when they serve specific neighborhoods.

Many types of community-level organizations can operate networks, including organizations with no prior child care experience, provided expert consultation is available in the early stages of the network's development. The administrative requirements for networks are modest—typically an office and one or two salaried employees—but they are ongoing. Identifying funding sources to cover ongoing operations and administrative costs is difficult, and the most serious problem facing many of the New York City networks is their financial instability. The establishment of mechanisms for providing reliable financial support to family day care networks is the task of policymakers, advocates, and funders who are concerned with improving the child care delivery system on which parents and children depend.

This report begins by placing the Child Care, Inc. project in the context of efforts launched across the nation to recruit, train, and support family day care providers. A summary of the Child Care, Inc. model of network development follows, which introduces the neighborhoods and community-based organizations where the networks were established—i.e., those visited during this evaluation. The structure and activities of those networks are then described, with an eye to the funding and staffing requirements for network operation. The report includes the comments the providers made to describe the benefits they see in network membership, and it reviews the key elements that contribute to the success of networks.

The aim of the report is to distill insights from the experiences of these eight New York City networks to increase understanding of the role these groups can play in the infrastructure needed to support family day care.

2

Background

Strategies for Promoting Professionalism in Family Day Care

During the late 1980s and early 1990s, family day care gained recognition nationwide as a legitimate part of the child care delivery system in the United States. The rapid growth in demand for all forms of child care, including care for infants, toddlers, and school-age children not easily accommodated by center-based programs, led parents, professionals, and policymakers to turn to care offered in private homes. Family day care may be the "oldest" form of child care, but its new visibility has brought public attention to concerns about how it should be regulated, organized, and supported.

Regulation. The informality, small size, and intimate character of family day care contribute to the uncertainty about how appropriate and feasible government oversight is, and state approaches to regulation vary widely. In most states, it was not until the mid-1960s or later that family day care was recognized as a distinct form of child care.[1] Regulatory standards today range from imitations of center requirements complete with engineer's reports to voluntary registration systems in which the provider certifies that she complies with state guidelines.[2] Moreover, only a fraction of family day care homes are reached by the regulatory system due to the limited outreach and enforcement capability of many states. As a result, parents' heavy reliance on family day care coexists with their considerable anxiety about the adequacy of the care. Increasingly, professional groups, community-based organizations, and private funders are stepping in to invest in the organization and training of family day care providers operating in their locales.

Public education, training, and recruitment efforts. Some of the most prominent investment efforts have worked to expand the supply of regulated family day care by recruiting providers, training them, and helping them meet regulatory requirements. The approach that any initiative adopts understandably reflects the capability and community role of the organization sponsoring it. For example, a four-year initiative of the National Council of Jewish Women (NCJW) prompted members of 29 local volunteer NCJW organizations to work collaboratively with others in their communities to tackle specific barriers to the development of good family day care.[3] Some advocated changes in restrictive zoning policies; others launched public education campaigns; others made telephone calls and held information sessions to recruit and orient new providers; and still others

connected providers with resources to help them become licensed and improve the quality of their care. Most of these short-term activities, undertaken by volunteers, expected to stimulate more long-term investments by other institutions in the community.

Another major initiative to support family day care providers has been the Family-to-Family project, conceived of and funded by Mervyn's, Target Stores, and the Dayton-Hudson Foundation. Begun in 1988, this project has enabled agencies in over 20 sites around the country to offer a 15-hour professional family day care training course to help providers become accredited, to create or strengthen provider associations, and to conduct consumer education activities aimed at parents. A resource and referral agency is the most common project sponsor, although in some cases a community college or a provider association receives the grant. The emphasis is not on recruiting new providers, but on improving the quality of the existing supply of family day care through training and professional recognition. The Family-to-Family experience gives organizations concerned with family day care a training package tailored to the needs and concerns of providers, and it boosts the image of this emerging profession and the community visibility of provider associations and other groups that represent and support family day care.[4]

A third example, the California Child Care Initiative Project, is a comprehensive model that aims to build the supply of family day care. This model has been implemented by resource and referral agencies in 25 California counties since 1985, and initiatives replicating it have been launched in Michigan and Oregon. The project begins by identifying areas where a shortage of child care exists. The resource and referral agencies then recruit individuals in those communities who have the potential to become licensed family day care providers, train them in child care skills and business practices, help them obtain licensing, and link them to workshops, toy lending libraries, and parent referrals. This model is primarily a recruitment effort. However, a 1989 study of the providers who had remained in business after two years led the project's leadership to focus more attention on strategies that contribute to provider retention.[5] Some of the study's recommendations suggested recruitment approaches that would also promote retention, such as helping potential providers realistically evaluate their prospects for success in an uncertain business. The findings also pointed to the importance of "a delivery system which provides coordinated, reliable support... a dependable, stable professional partner" for the provider.

Ongoing support services—systems, associations, and networks. Family day care providers are isolated in their homes by the very nature of their work, and the importance of giving them access to an ongoing source of support has long been recognized. Approaches vary, however, in the emphasis given to monitoring and supervisory support or to voluntary and peer-oriented support activities. Examples of the two approaches are family day care systems, typically established by social service agencies to care for children receiving public subsidies,[6] and provider associations that are advocacy and support groups run by and for providers.[7]

Family day care systems typically offer concentrated training, assistance, and oversight to a defined group of carefully screened providers who agree to care for children placed in their homes by the agency. The agency determines the children's eligibility, handles financial arrangements with whatever organization is paying for the care (usually the state, or the local United Way), and pays the provider a standard per-child rate or a salary. Many of these agencies also manage foster care placements, and their practices and philosophies often derive from a social work tradition. A staff person, variously called a home supervisor, home visitor, or coordinator, makes regular visits to providers' homes to consult about how to handle child care issues and about the individual children's progress. Depending on the philosophy adopted by the agency and staff, providers can perceive the system as reassuring and supportive, or as intrusive and paternalistic.

Associations of family day care providers are rapidly becoming more common and are an important source of support, information, and collective action. The first association was established in the state of Washington in 1966[8] and many local and state-level associations followed. In 1982, the National Association for Family Day Care was formed. Associations meet many of the support needs of their members, mostly providers, for informal contact with peers, for training through workshops and conferences, for policy information and targeted advocacy efforts, and for professional recognition. However, since associations typically depend on fundraising and member fees for financial support, they must rely on volunteers to lead the organization and implement plans. Established associations can provide a wide array of supports to their members,[9] but newer, smaller associations have more limited offerings and demand greater investments of time and energy from members.

A third form of ongoing support for family day care providers, the network, falls between the system and the association. *Networks* can be sponsored by a wide variety of organizations, from social service agencies, resource and referral agencies, and child care centers, to churches and neighborhood associations. They vary considerably in the range of supports they provide. Like family day care systems, they typically have at least a part-time staff person who is paid to contact, assist, and respond to the providers who are network members. However, although some networks offer referrals to parents who are seeking child care, they do not typically place children in homes or become involved in the financial aspects of the provider's business. For this reason they do not direct or control the provider's child care practices. Networks resemble family day care associations in their emphasis on bringing providers together for support group meetings, linking providers to the broader early childhood field, and improving the public image of family day care. The line distinguishing networks from associations is blurred, since the support group meetings many networks hold for members frequently give rise to new associations led by the providers that may assume some of the peer interaction and professional development functions initiated by the network. The major differences between networks and associations are that a paid employee coordinates the networks, not the elected members, and networks sometimes impose requirements on the providers who join.

Many networks evolve to give providers access to the Child and Adult Care Food Program, the federal nutrition program that reimburses caregivers for the meals they serve children if the providers have a sponsoring organization. The sponsor's obligations to the food program are to ensure that the providers receive nutrition education, to monitor the food service in the homes, and to handle the food program paperwork and reimbursements. For that effort, the organization receives an administrative fee of $29 to $55 per provider per month, depending on the number of homes sponsored by the organization.

Networks develop in other ways as well. Some grow out of recruitment initiatives—if funding is available to cover the salary of a staff person who can maintain active contact with providers after they complete training and are in business. Organizations that parents can call for child care referrals sometimes maintain a list of network providers, used for referrals, and a staff member sometimes serves as an intermediary to help the parent and provider connect. In some cases, employers establish family day care networks to meet the child care needs of their employees. Also, organizations that operate child care centers for special populations may set up networks of independent family day care providers to accommodate parents with infants, or those who live far from the center, or those who prefer home-based care. Such networks resemble the family day care systems described earlier, but they do not require that the provider limit her business to children placed by the network. Also, their screening and monitoring procedures tend to be more modest than those used by traditional systems.

The growing prevalence of family day care networks that combine the strengths of a paid staff person with the voluntary participation and independence of member providers was demonstrated in a recent study conducted by the National Center for Children in Poverty of organizations that support family day care specifically in low-income communities. The 88 programs identified by the study varied widely in scope and emphasis.[10] Over half (58 percent) could be considered family day care networks—a criterion being whether the program offered at least three of the following five services: training, client referrals, food program sponsorship, peer support, and access to an early childhood specialist. Training in child care, child development, and business was the most common activity (fully 98 percent of the programs offered training), and translating written materials or working in languages other than English was the least common (offered by only 17 percent). About half (47 percent) sponsored the food program, and a similar proportion (51 percent) lent toys and child care equipment to providers. More programs offered peer support (61 percent) and either referred or placed children in the home (60 percent). Assistance with the licensing process was available from 56 percent of the programs, but only 28 percent could help the providers with financial assistance through loans or grants. The program staff in these organizations often included an early childhood specialist, who made home visits or was available by telephone to consult about problems the provider was facing (available from 42 percent of the programs).

As other writers have noted,[11] networks, associations, and other efforts like these are signs of an "emerging infrastructure" that can develop and support professionalism in family child care. Ongoing and community-based, this infrastructure can play an invaluable role that complements government regulation and short-term efforts like public education, training, and recruitment initiatives.

Family Day Care in New York City

The development of family day care in the nation's largest city reflects the influence of many trends common across the country: a growing demand for child care, especially for infants; inconsistent enforcement of government regulations for family day care; and anxiety on the part of parents and the public about the safety and quality of the care offered in these small, private settings. New York City has faced an especially limited supply of regulated child care for infants and toddlers. In 1986 it was estimated that 68,000 New York City children under three years of age needed child care, but the city had only 5,000 licensed child care spaces available for those children.[12]

Any individual who cares for three or more children in New York State must register with the state and comply with state standards. However, as is true nationwide, only a small proportion of the individuals who care for children in their homes are actually regulated by public agencies, in part because they do not know they should be registered or they fear they would not meet standards, or because the regulatory process is so complex.[13] In New York City, responsibility for regulating family day care has been divided between the Human Resource Administration's Agency for Child Development (ACD), which oversees homes that serve children receiving public subsidies, and the New York City Department of Health, which regulates independent homes that serve parents who pay for the care their children receive. In 1986, ACD had licensed 2,000 homes to serve children who received care through the agency, while the Department of Health had licensed only about 100 homes to serve the private market. Given the limited supply of licensed family day care, it was estimated that the children of working parents in the city were receiving care in up to 25,000 unlicensed homes.

Corporations, private funders, and community organizations in New York City have taken steps to expand the supply of regulated child care by developing the private family day care market and investing in its quality. In particular, funders have sought strategies to encourage the thousands of unregulated providers who care for children informally to enter the formal child care system—to receive training, become licensed, and enroll with referral services and undertake other professional activities. Many of these efforts have been thrown into confusion recently because New York State has shifted from a system of licensing family day care to a registration system that involves more paperwork and less public oversight. Nevertheless, in efforts to develop the city's child care supply, outreach activities to unregulated or newly interested providers have increased.

Community-based networks of family day care providers are the primary vehicle used to reach out to informal and new providers, to encourage them to become licensed, and to link them to an ongoing source of support and assistance. In New York City, ACD organizes the providers who care for publicly subsidized children into systems, which are often linked to a subsidized child care center. These organizations offer training, support, and oversight through regular visits by professionally trained coordinators; the agency places both equipment and children in the homes and pays the providers stipends for their work. These agency systems exert considerable professional and financial control over participating providers, who have until recently not been allowed to mingle private-paying children with their publicly subsidized children.

Another type of New York City family day care organization exists outside the subsidized child care system. In the early 1980s, prior to which New York City providers were left unregulated and relatively unsupported, several community groups began to establish loose networks of private providers who cared for children who were not subsidized. In 1984, four such networks worked with independent family day care providers: the 92 Street Y on the Upper East Side, the Church of the Living Hope in East Harlem, the Lower East Side Family Resource Center, and the Church of the Open Door in Brooklyn. These networks pressed the Department of Health to meet its obligations by committing staff to license the providers, and they offered peer support, training opportunities, and sometimes informal referral of parents interested in finding family day care. They assumed no financial control over the providers, who joined the networks as independent entrepreneurs.

In the mid-1980s, Dee Topol, then on the staff of the American Express Foundation, became interested in family day care as a way of developing child care without building new centers and as an employment opportunity for women. She turned first to ACD to launch a project that used the agency's experience managing groups of family day care providers in their subsidized systems to develop training and networks for women who would work independently for private-paying clients. Two years of experience showed that developing networks for independent providers was feasible, but that a massive bureaucratic agency, such as ACD, dedicated to a different style of working with providers, was not suited to best manage such a project. American Express invited Child Care, Inc. to expand the idea and take on the challenge of developing networks of independent providers in neighborhoods throughout the city; that initiation led to the Neighborhood Child Care Initiatives Project.

3

Child Care, Inc.'s Network Development Effort

Child Care, Inc.'s Neighborhood Child Care Initiatives Project was designed as a capacity-building model—with the goal of transferring to neighborhood-based organizations the skills and tools needed to operate a network to recruit, train, and maintain ongoing contact with independent family day care providers. Project staff first targeted residential neighborhoods in four New York City boroughs that lacked an adequate supply of child care and had a potential pool of providers. Then they identified organizations with an interest in child care and worked with them to develop family day care networks. Eleven sponsors were chosen to develop family day care networks under this project, eight of which are currently active. The organizations included social service agencies, churches, community colleges, and other community-based groups that had demonstrated a concern about child care needs. The diversity of both the neighborhoods and the organizations selected makes their experiences a rich source of lessons that may be of value to others seeking to develop family day care networks.

The Choice of Communities

The project sought to establish family day care networks in areas of New York City that lacked sufficient licensed child care but had both a documented demand for out-of-home care (such as many working families) and the type of housing that would enable new family day care providers to meet licensing standards (e.g. areas not dominated by housing projects). New York State regulations do not prevent care in apartment buildings, as some state's regulations do, so long as there is sufficient space available and safety precautions such as window bars. Neighborhoods with both unmet child care need and potential providers were not difficult to find in the nation's largest city. The eight networks included three in Manhattan, two in the Bronx, two in Brooklyn, and one in Queens.

The *Jobs for Youth Family Day Care Network*, one of the Manhattan networks, was initially located in Harlem, a crowded but residential community where providers are not hard to find. The organization later moved to a midtown commercial district, where it is difficult to develop family day care homes in any proximity to the organization's offices. The *Borough of Manhattan Community College (BMCC) Family Day Care Network* serves the college and the area near the financial district in lower Manhattan. These residential areas

are socioeconomically mixed, and this network includes some providers in spacious lofts and others in smaller, run-down apartments. However, since the student parents who need child care are scattered throughout New York, providers from the entire city participate in this network. *HACER*, the third Manhattan network, has one branch in Washington Heights, a crowded, hard-pressed Latino neighborhood where the greatest challenges are to remove language barriers, make the apartments of interested women safe enough to meet regulatory standards, and encourage local residents to view family day care as quality child care. A second branch of this network, which also makes training available in Spanish, works with Spanish-speaking providers in the south Bronx, a stressed section of the city where the need for family day care is strong among employees of many nearby hospitals and police stations who work odd hours and night shifts.

Two other networks focus their activities in the Bronx. The *Bronx Community College (BCC) Family Day Care Network* serves a predominantly Latino neighborhood surrounding the college, in an area with a mix of poor single parent families and working-class families living in either apartments or in one- or two-family homes. There the network's activities are conducted in English, although the primary staff person is bilingual. Farther north in the Bronx, the *St. Peter's Family Day Care Network* became established in a less densely populated area where small homes and three-story buildings predominate, and where public transportation is less available than in many parts of the city. Here there are many single-parent families, many homeowners, and the community is fairly stable, working class, and ethnically diverse, including Caribbean, Latino, Italian, and African-American families.

In Brooklyn, Child Care, Inc. worked with two networks located close to each other in Flatbush, a busy, crowded community dominated by immigrant families from the Caribbean. The *Flatbush Haitian Family Day Care Network* focuses on the Haitian population and offers training in Creole as well as in English. The other network, the *Erasmus Neighborhood Federation Family Day Care Network*, operates in English, the native language of its many West Indian providers. Flatbush is home to many immigrant families that are both poor and hard-working. Many of these parents, in one- and two-parent families, commute to Manhattan to work in offices or as domestics; others are picked up in the early morning hours by vans that take them to and from factory jobs on Long Island. The commute makes for a long workday and leads many parents to prefer family day care over center care—because centers have more rigid opening and closing hours.

Finally in Queens, the *Forest Hills Community House Family Day Care Network* serves a fairly defined, relatively working-class area including Rego Park, Flushing, and Forest Hills. However, because it was the only group offering family day care training throughout Queens, it has worked with providers from the entire borough. That scope brings great diversity to the network—both socioeconomic and ethnic—although the borough is large and not well-served by public transportation. This network has providers in Haitian, Latino, Greek, Irish, Indian, and Russian neighborhoods. Some providers live in apartments,

and others live in duplex or single-family homes with yards. Regulatory standards for health and safety are generally met easily. The demand for child care in Queens is strong, especially from professional families with two working parents and from families who immigrated recently in which several family members work for the equivalent of one modest income. Families from such differing backgrounds have different expectations of child care, however, which make it challenging to match parents with care arrangements that meet specific requirements concerning program, location, hours, and cost.

Sponsoring Organizations

The characteristics of each sponsoring organization contribute to each network's development in significant ways. Two of the eight networks are affiliated with child care programs serving community colleges, BCC and BMCC. In those organizations, the program directors have substantial child care expertise, and both operate on-site child care centers at the college. Though the early childhood programs operate independently of the community colleges, each receive dedicated funding to offer child care to the children of the college's students, and those funds can also support the family day care network's activities.

Two job training organizations, Jobs for Youth and HACER, who are similarly focused on the child care needs of a target population, also sponsor family day care networks. HACER started its network to increase the availability of child care in the community at large. Jobs for Youth was primarily interested in assuring that child care was available to the welfare recipients or dislocated workers who participated in its job training programs. Both groups also explored a secondary interest—to present family day care training as one of the job training options for the program participants, (although this is not their main purpose in sponsoring the network). The organizations themselves do not handle funds to cover the costs of child care (as the community colleges do), but most participants are eligible for public subsidy programs that provide vouchers to pay for their child care costs. This offers the family day care providers in the networks a relatively reliable source of income.

Community-based agencies developed the remaining four networks. Two sponsors, the Flatbush Haitian Center and the Forest Hills Community House, operate comparatively large, multiservice agencies with sizable budgets that attempt to meet the varied needs of neighborhood residents. The Flatbush Haitian Center focuses on the special concerns of an immigrant community; the Forest Hills Community House offers many services for senior citizens. In each case, the many programs run by the agency include a center-based nursery school or child care services, but the family day care networks operate independently of those child care programs. The family day care efforts of both multiservice organizations have been supported solely by grant funds from public agencies, corporations, or private foundations.

The final two organizations choosing to work with Child Care, Inc. to launch family day care networks are small, grass-roots organizations—St. Peter's Church and the Erasmus Neighborhood Federation. These groups have strong ties to the local community, which give the networks good visibility and credibility. The staff they hired were members of the local community. With limited financial flexibility, however, these organizations can offer the networks only in-kind assistance and little financial support. Like their counterparts in the multiservice agencies, these family day care networks survive on grant funds.

The Network Development Model

To enable community agencies to launch networks, Child Care, Inc. designed a network development package. This included a guide describing network organization, sample recruitment materials, a nine-module curriculum for family day care training, and a manual for each provider. A mentoring approach was used to train network coordinators. The network coordinators, hired by the sponsoring organizations, did not always have experience with child care or with the role of trainer. Child Care, Inc.'s family day care experts worked closely with the coordinators to plan and conduct the first year's provider training courses, shifting more and more of the responsibility for the training to the coordinators as their skills and confidence developed. After the coordinators took over the training, they often maintained contact with Child Care, Inc. They called for information and advice, and they attended bimonthly network coordinator meetings held at Child Care, Inc. Staff members working with any of the sixteen or more independent networks in the city were invited to these.

In some cases Child Care, Inc. initiated the discussions about family day care networks with the community-based group; in other cases, they responded to the local organization's request for assistance. Some networks also received pass-through grant funds from Child Care, Inc. to support staff salaries or other costs during the early years of the network's operation. The level and duration of that financial contribution varied. It was initially thought that public monies would be allocated in the city budget to pay for the training and oversight activities of family day care networks, but that funding strategy did not succeed. Instead, the networks pursued individual combinations of public and private grants to support their work, sometimes with the help of Child Care, Inc., and sometimes independently. Although several networks closed over the seven-year period for one reason or another, the majority received external funds or the support of the sponsoring organization and moved toward self-sufficiency.

4

Characteristics of Family Day Care Networks

The Structure of Family Day Care Networks

In choosing network sponsors, Child Care, Inc. first looked for organizations that had an identified constituency and high visibility and credibility in the community. All eight agencies visited by the evaluators satisfied those criteria. In addition, to operate a network successfully, the agency had to have a reasonably secure financial base, access to appropriate physical space, and stable staffing. Over time, it was found that maintaining the funding, physical space, and staffing needed to support the network often posed problems for the sponsoring agency.

Funding. Community colleges had little problem supporting the networks financially. Each college had a commitment, backed up by funding, to meet the child care needs of the student population. A portion of these funds covered the costs of operating the family day care network. The job training organizations, as described, funded some of the network's activities if they included provider training as one of the host organization's training options. However, a career in family day care was not, in all cases, the best option for job training participants, and a substantial number did not follow through to become providers. These networks also reached out to potential caregivers in the larger community to ensure that reliable homes were available to provide good child care. One of these organizations is likely to discontinue its network, and the other is struggling to manage. Finding the necessary funding to maintain the general operation of the network has been a challenge for these groups.

Three of the remaining four networks have relied on grants from both public and private sources over the last few years. However, grant funds are unpredictable and are sometimes limited in focus. For instance, for two years New York State offered grants to organizations to give providers start-up equipment and resources. Fortunately, many of the networks received those grants. Then the state discontinued the start-up grants and issued a request for proposals to train family day care providers. Most networks submitted bids to receive those funds, as well, but the state delayed making these grants for nearly two years. Several networks relied heavily on the unrestricted grant funds that are sometimes available from foundations, banks, large corporations, and unions. These funds, while welcome, offer little long-term stability for host organizations as they struggle to sustain network services.

Physical space. The physical space that networks require is relatively minimal. Staff members need appropriate office space to make telephone calls, organize network correspondence and files, and in some cases talk with parents who visit the agency. The networks also need access to meeting space suitable for up to fifty people—to hold workshops, support group meetings, and training sessions on a monthly or sometimes weekly basis. Although these needs are minimal, they are not always met. The two job training programs incorporated provider training and network services within their broader program and did not set aside space specifically dedicated to family day care, although both organizations had large meeting areas. The community college programs had both office space and access to the large preschool rooms for use during the evenings or weekends. Three of the four community-based organizations provided both meeting and office areas (with some crowding). The fourth had to borrow meeting rooms from other neighborhood organizations—and recently postponed a training session because adequate space could not be found.

Staff. Implicit in the definition of networks offered here is the expectation that a paid staff person manage the network. This is typically a coordinator, who may be joined by one or two assistants. (Although one of the network coordinators interviewed was a man, the role is most often held by a woman, and throughout this report feminine pronouns are used to refer to both network coordinators and providers). Three of the networks employed a full-time coordinator and two other staff members to work with the family day care network. Another organization employed only one full-time coordinator, who managed a workload that could keep three people busy (at considerable personal cost). The remaining four networks could employ only a part-time coordinator who struggled to carry out the network's promised services. One coordinator remarked, "The training and the network run on blood, sweat, and tears." Another commented, "Network coordinators have too many hats and work too much. Each coordinator says that they do not have enough help." One coordinator, who is paid to manage the network only on a part-time basis, stated that a model network needs two full-time coordinators to ensure that providers' needs are met. She argues, "It's a lot [of work] because it seems like you are needed everywhere at the same time. It gets impossible."

The role assumed by the coordinator depends on the focus and size of the network, the coordinator's personal interests and skills, her commitment to the network, and the expectations of the providers she works with. Most of the networks described here channeled information to providers about policy changes, available resources, and upcoming meetings or events. They sent out mailings regularly. Some coordinators said they lacked the time to visit providers at home, although they were available by telephone. Others made visits to provider homes so often that they rarely called to set an appointment. Some providers relied heavily on the support of the coordinator—to sort out difficulties, explain the bureaucracy, or just express their frustrations. One provider said, if you are "just going crazy, [the network] will send someone over to help you before you explode, and they tell providers not to feel guilty, assuring them that it happens to everyone sometimes." One coordinator remarked, "I have a very calming effect on them."

Often, coordinators feared that if they were to leave their jobs, the network might collapse, leaving the providers without a professional reference group. To address this concern, two coordinators acknowledged the importance of the support they offer the providers, but argued that it is not the coordinator but the group of providers, as a collective, that makes up the network. "The network is not me; the network is not our office; the network is them." One coordinator was in the process of organizing a board of providers with a president, vice president, secretary, and treasurer, urging the providers to begin acting on their own behalf. Another stressed that she does not take an authoritative position with her providers: "I see myself as part of a family. I tell my providers, 'We are all family here.' . . . I don't see myself as a leader but I see myself among them. I really mingle with them."

In networks established to meet the child care needs of particular parents, coordinators spent a considerable amount of time on the telephone with parents and providers, learning about the parents' needs and about vacancies in providers' homes. Even if the network did not actively make referrals for parents, coordinators often were asked their advice when problems arose between parents and providers. One provider acknowledged the difficult role a coordinator plays, "To be a good coordinator, you have to be very diplomatic. You have to know how to get along with the parents as well as the providers." The provider thought that it was important that the coordinator be an impartial person, because she has to be objective when it comes to conflicts with parents or disagreements between providers. "It takes a certain personality to be able to deal with all the different segments of the whole pie."

The Purposes and Constituencies Served by Networks

What is the function of family day care networks, and whom do they serve? Child Care, Inc. has defined family day care networks in a manner consistent with the concept presented in the introduction, as "organizations in the community that serve as a focal point of activity around family day care, providing training and support to providers and information resources to parents." Networks encourage rather than mandate provider participation, and they can provide ongoing recruitment, orientation, training, and support services for providers, as well as resources like toy libraries and federal child care food subsidies. These activities meet provider needs. Some networks, however, also assist parents from the local community to find an appropriate caregiver. This adds a second constituency. To learn what aims are espoused in practice by the New York City networks, the evaluators asked network coordinators to define what a network is. Few answered by reciting a list of specific activities. Instead, the coordinators tended to give a general depiction of the critical functions a network can fill.

Provider support. Most coordinators focused on the providers as the network's primary audience. Some concentrated on the business-oriented and pragmatic nature of family day

care networks. For example, one coordinator referred to a network as a "resource center where information is gathered, where there are people who are informed about the rules and regulations, people who are aware of how to take care of children ...and [who] transmit this message to the people who are doing underground [care] and bring them to do it legally by helping them set up their homes."

Another described a network as a "group of people meeting, sharing information and ideas on how to improve their businesses, looking to see what resources are available to them." Coordinators working in job training programs were especially likely to give responses of this type. With a professional investment in developing work-related skills, they saw networks as opportunities to support entrepreneurism. One coordinator referred to the network as a "business incubator" that prepares providers to succeed on their own. An emphasis on brokering information was also important to the staff members who worked with immigrant groups—who are otherwise cut off from both the mainstream society's knowledge and resources.

Most of the coordinators described networks as vehicles for offering professional and personal support to providers in an ongoing way. Some coordinators stressed the training and services that the network makes available to providers; one described it as an "opportunity for folks doing family day care or interested in family day care to get a core of services and support."

The network's assistance can be very pragmatic. One coordinator mentioned the providers' interest in finding cheap prices on children's cots and places to borrow videos, and in hearing about policy updates gleaned from city and state advocacy meetings. More complex issues also emerged—such as a provider's responsibility if it would appear that a child had been abused. Another coordinator said the network "helps providers, assists them. . .they know they can call and get an answer. They love to know someone will visit them and see what they are doing. . .be there for them." The network offers someone to represent the providers and to reassure them they are not working alone.

Human contact and personal relationships are pivotal sources of support, and the establishment of networks give providers a chance to talk about their work, to brag, laugh, complain, and worry out loud with people who are likely to understand. One provider explained that she sees the network coordinator as a confidante who helps her maintain perspective and stay "sane." Continuity is important to such close relationships. One coordinator put it this way, "To me it is a continued relationship with the same people. That's what a network is. Training and leaving providers—that's not a network. You need the investment in the group you work with—how do you know their needs if you do not know who they are?"

In addition to coordinator contact, networks offer providers a chance to talk and compare notes with peers at workshops, meetings, or over the telephone. One coordinator said:

"Networking, like the word says, means you are not working by yourself. You have other people you can refer to and ask for advice. You can form a group. Everyone does the same job, but in a different way, and one can help the other." To encourage the providers to call on one another for advice and support, lists of telephone numbers are often circulated. One overburdened coordinator stated emphatically, "the network is them, not me."

Assistance to parents. Although provider support was the initial response most coordinators offered, when asked the definition of a network, they also mentioned parents. Several of the network sponsors were organizations serving parents with direct child care needs. The community colleges and job training agencies developed networks largely to give the host organization's program participants access to child care while they participated in training or attended classes. For example, a job training program coordinator described her role simply as a resource broker: "We act as a liaison between providers and parents." Another coordinator said that a network's services must include parent education because the network's constituency includes the children, student parents, and the providers. She acknowledged that these combinations can make the network's role ambiguous and that conflicts sometimes arise when parents and providers have differences of opinion and ask the coordinator to mediate. Not all coordinators interpreted the network's role that broadly, however. Another coordinator said she reacts to parent complaints by listening and suggesting that the parent and provider resolve the problem themselves.

Many networks, in addition to those serving a specific group of parents with child care needs, actively marketed child care services to parents—taking their inquiries, discussing what family day care is and how to make a choice of providers, and putting the parent in touch with several of the network members. These conversations combine child care referrals with public education. Over time, this type of work can gradually alter the community's perception that family day care is "just babysitting."

Views of providers. The family day care providers interviewed in the study were also divided in their views of the roles and functions of networks. Like the coordinators, many providers spoke first of the new ideas, support, reassurance, and peer interaction they derive from membership in the network. However, an equally consistent refrain drew parents into the picture. To varying degrees, providers relied on network referrals to keep their child care spaces filled. Moreover, many said they valued the opportunity to tell parents they were affiliated with a network operated by a community organization, and to explain that network membership means that the home has been checked, the provider has attended training, and an independent group has overseen the quality of care offered in the home. The network as a source of credibility and oversight became especially salient in New York City after voluntary registration was instituted in place of family day care licensing and its mandatory inspections.

Network Services

As the preceding discussion illustrates, networks perform a variety of services that depend on the needs of constituents, the resources available, and the mission or goals set by the network's staff. Services include recruitment and initial training, toy or equipment loans, access to the federal food program, peer support groups or workshops, parent referrals, and home visits by the coordinator. The networks studied varied in which of these services they offered, and in how frequently or intensively they offered them.

Recruitment and training. Recruitment to attract potential family day care providers to a network's training course posed no problems for any of the eight networks visited. Although most networks began by posting fliers and placing ads to announce training sessions, all found that word-of-mouth was the most effective recruitment method. All eight of the networks offered training courses for new providers two, three, or four times a year, each lasting about nine weeks. Nearly all the networks were able to maintain that core service from the beginning, although financial pressures led many to institute a $15–$65 fee for a provider to attend the training session and receive a copy of the provider manual. Most of the training courses were conducted in English, although one network translated its manual into Spanish and another used English materials but conducted the training sessions in Creole. The sessions typically lasted for about two hours once or twice a week. Half the networks scheduled their training sessions on weekday mornings, the other half found better attendance at weekday evening sessions.

The following list covers the topics in one typical network's training course:

- Orientation—what family day care means
- Business management—marketing, contracts, records
- Health and safety
- Working with parents
- Early childhood development —infants and toddlers
- Early childhood development—older children, discipline
- Learning through play
- Food and nutrition
- Evaluating yourself, graduation celebration.

Graduation was an important event for all the networks. Prominent child care and community leaders attended each graduation, and the speeches and presentation of the graduates were always followed by food and celebration.

Tangible resources. In addition to offering training, some of the networks linked providers to tangible resources. At one point several years ago, state funds enabled many of the networks to pay for safety measures or start-up equipment for providers to use during their first years of operation. Some networks encouraged the providers to return the equipment if they stopped offering child care—so that the network could make it available to another new home. Four of the networks received grants from private sources to add resource libraries with toys, books, and other equipment available on loan to providers. Depending on the income level of the community served, coordinators either described such start-up assistance as important or as welcome but not essential.

Another way some networks linked members to tangible resources was to sponsor providers' participation in the Child and Adult Care Food Program so they can receive reimbursements for the cost of meals they served the children. Only two networks acted as sponsors for this program themselves, but a number of the providers in other networks participated through Child Care, Inc.'s sponsorship of the program. Several network coordinators said they had considered becoming sponsors but hesitated because of the extensive paperwork involved.

Regular meetings. After their initial training courses, six of the eight networks studies held special workshops or support group meetings periodically. Three networks tried to hold workshops four times a year, and three scheduled them monthly, usually during the evening or on Saturday. Participation at the workshops ranged from 10 to 35 providers. The best attendance record was at a network in which workshop participation was mandatory. One network offered special skill-building workshops on topics like taxes, nutrition, and child abuse. These were held separately from support group meetings designed for providers to meet informally and discuss their family day care experiences. Other networks combined the two types of meetings into one event to minimize the already long hours that the providers put into their work. For instance, one network held monthly three-hour in-service meetings; the first hour was devoted to sharing and informal discussion, followed by a workshop on a specific topic.

Home visits. Building on the initial training and network meetings, most of the coordinators made home visits to the providers in their networks. The purpose of the visits was to see that the home was safe and not too crowded, to offer advice about arranging the child care rooms, to confer about any children that may have concerned the provider, or just to hear how things were going. Most of the coordinators visited the providers during or just after the initial training to help them prepare their homes for child care and to ensure that the homes met regulatory standards. The coordinators making referrals also felt that home visits gave them confidence in giving parents the names of network providers. One put it this way: "The most important thing in any network, I would say, is that you know the people, you know them personally."

Most importantly, however, the coordinators spoke of home visits as extending the value of training and offering the family day care providers one-to-one support. Home visits allowed the coordinator to observe the provider working with children and to give her feedback and suggestions for trying different approaches. In that way, visits helped providers apply what they studied in training. As one coordinator said, "Book learning is one thing, but experiencing is another." Moreover, the providers needed and appreciated affirmation that they were operating their businesses appropriately. One coordinator explained that providers "want to do a good job... They prefer to be visited so that someone can tell them what they are doing wrong." Providers also welcomed the coordinator's visits as a break in the isolation that so many feel while they are at home, surrounded by children all day. While the visits served a monitoring function, they became more personal than supervisory. One coordinator mentioned that the providers ask her to come visit. "I make them like a part of my family," she said.

Parent referrals. The eight networks differed most widely in the extent of their efforts to refer parents to the homes of network providers. The networks sponsored by the community colleges and job training programs had direct contact with a defined group of parents whom they referred to their providers. The community college networks also paid for the care, either directly out of funds allocated to pay for student parents' child care, or as an intermediary between the providers and the Office of Employment Services, which pays for child care for students who receive public assistance. Because the college network was involved, these providers did not have to wait the typical six to eight weeks to receive payment through the welfare office. That level of financial service made providers in all parts of the city interested in joining the network and caring for the students' children. The college networks also placed children in the homes of providers who had been trained by other networks, provided the location of the home met the needs of parents and the network coordinator had first visited the homes to check its quality.

The job training programs also had contact with many clients who needed child care and who could have that care paid for by the welfare office. However, neither of those networks could advance payments to providers. One network coordinator used the program's relationship with the Office of Employment Services to urge that the payments to providers be expedited. The coordinator also followed up with the parents (who received the two-party reimbursement checks) to ensure that they promptly passed on the checks to their providers. The college-based and job training networks also made referrals for parents who did not attend the host organization's programs, and they urged network providers to market their services independently.

The community-based networks sponsored by grass-roots agencies, were at the time of the study actively involved in referring parents from the community to the providers in their networks. One advertised its referral service by posting fliers in stores and mailings by the host organization; the other received more calls through word-of-mouth than she could handle. Both coordinators estimated that over half the children in their providers'

homes had been referred through the network first. They also explained that when parents call providers directly to ask about child care, the providers sometimes suggest that the parent speak first with the network coordinator so she can explain what family day care is and can help the parents evaluate its appropriateness to their situation. Several of the network coordinators commented that providers prefer to have the coordinator serve as an intermediary than to receive calls directly from parents. These calls can intrude on the provider's privacy, distract them from the children, and can be rude or challenging. (One provider spoke of feeling that parents were "interrogating" her.)

The two multiservice agency networks in the study offered more limited referral assistance to parents. One of these network coordinators did not view referrals as integral to the network. The other had been able at one time to devote two days a week to making referrals. She described the referral process in the same way as the other coordinators: (1) asking first about the parent's needs (where they live and work, how old the child is, whether they are seeking center or family day care); (2) discussing the differences between home-based and center care; (3) explaining that the network trains and periodically visits the providers; and (4) giving the names of several providers located close to the parent's home or workplace.

A balanced package. In conclusion, family day care networks offer providers training, business assistance, and a measure of accountability, and they also organize and empower members to act on their own behalf as professionals. Combining both approaches strengthens the credibility of the network both with the providers, who are its primary constituents, and with the larger community served. Networks increase providers' professionalism, through training and home visits, and they support and reward professionalism through referrals, peer contact, and links with the wider child care community.

5

Providers' Perspectives

Although the coordinators interviewed agreed that networks play a critical role in the professionalization of family day care and that providers value especially the supports offered by networks, this study also focuses directly on the providers' perspectives. Why did the providers join networks? What services did providers expect to receive from networks? Why did the providers decide to become certified or registered?

Supports and Connections

Most providers joined the networks seeking support. One provider referred to her network as a "guiding light" for the providers. The support services most providers sought were home visits, peer support, and individual consultations from the coordinator. Moreover, it was important to the providers that they were "represented" and not left alone in their work. "A network is someone to work things out with you," said one provider. A coordinator is "someone to lean on [and she] keeps you up-to-date." One provider felt that, "It's important to be a member somewhere. It's nice to have someone visit and talk with." Another provider remarked, "Without that network, I think a lot of people would fall flat on their face."

Providers often spoke of their network with intimacy. Many considered the network as part of their families. Networks connect providers to the outside world, reducing the isolation that is inherent in working alone at home. One provider acknowledged the empathy a network coordinator and other providers can offer: "It is an 'extended' extended family. They support you because they are the ones who understand what you're going through, why, and how. I can talk to a parent and I can get their support on a certain level. I can talk to friends on the phone and they can 'yes' me to death, but only another person who is in the business can truly understand what you are going through . . . From the network you get the support and deal with people that know what you're going through."

Providers often looked to networks for information on policy issues. They sometimes expected and relied on a network representative to attend professional meetings on their behalf. Many providers agreed that family day care is time consuming, demanding, and draining and that it is difficult to run a business and get involved in broader issues. Having

a coordinator who can serve as an advocate and a representative for providers is especially important for immigrants, who are not only struggling to work in a new country but have the added burden of assimilating to a new society and culture. One provider stated, "I'm not from this country, and I need to keep connected and abreast of issues."

Access to Parents

In addition to professional and peer support, providers sought referrals for children from the networks. Some believed that joining the network guaranteed that children would be referred to their homes. Although many networks did indicate a high rate of child placement, others encouraged the providers to market their own services. One provider commented that recruiting children was definitely the most problematic aspect of family day care for her; another provider had to turn away children regularly because her home was always full. Of course, the difference in their experiences depended not only on the network's referral service but on the area in which the provider lived, the need for child care in that community, and the amount parents could pay relative to the rates charged.

Through their training and support activities, networks contribute to the professional image that family day care providers present—in ways that parents appreciate. One provider has noticed a marked change in parents' attitudes when they actually see her home. "I think that they still think that you are a babysitter and that's all you do. A lot of private parents that I talk to . . . when they get here they are like 'oh, this is just like a classroom.' They expected just somebody to keep an eye on the kids, just a custodial type of thing. We really stress the playing, the creating . . ." Other providers maintain a more home-like setting but build in the same types of developmental experiences for the children as the others.

Providers agreed that networks can play a pivotal role in reassuring people about the quality of the care they can expect. Providers often, if not always, mentioned that when they tell parents that they belong to a network, the information gives them increased credibility. Even if the parent has not questioned the provider's credentials, the mention of a network can gain the trust of the parent. Providers said that it was important to be able to say that someone representative of the child care field had been in their home. Network membership offers reassurance to parents that providers have been trained and that they have an ongoing relationship with the network, which alleviates many apprehensions parents have concerning family day care. One coordinator mentioned that providers "think that being in the network gives them respect from parents, respect from society. The training shows them that they are professional. They are not doing a lazy job."

Regulatory Status

Several of the providers interviewed also described the shift in New York from licensing to registration, in which regular home visits are no longer required, and indicated that network affiliation was especially important. Network coordinators still make visits to the homes, and many providers appreciate that oversight. One commented that training is important, but providers can "just go through the motions, get their diploma, and get out." In her eyes, home visits ensure that the care in the home is what it should be. The same provider said, "Licensing is no good if no one is watching the people."

Network coordinators urge providers to become regulated, and they can help providers get through the cumbersome paperwork associated with registration. One coordinator believes that she has a number of women in her network who would not have become regulated if it were not for the help offered by the network. Afterwards she said, "They told me it's easier to become legal than working illegally." All the providers interviewed decided to become licensed because it was important to them to operate their businesses legally. Fear motivated some providers: "Someone may report me, or something may happen to my kids." One provider decided to become registered when parents started asking for social security numbers to use when they claimed a child care credit on their tax returns. Other providers simply felt more confident when they had complied with the regulations and could work with a clearer conscience.

Parents, too, are concerned about the legal status of a provider's family day care home. The majority of the providers interviewed said that parents did ask them if they were registered with the state. In some cases, parents had received a referral from the network and already knew about the provider's credentials; in other cases, the providers volunteered the information. Providers themselves said that proof of registration is attractive to parents. "It really counts that parents know you are licensed. It makes a difference." Only two providers remarked that parents are sometimes so desperate for child care that official proofs of safety do not matter.

Professionalism

In the providers' eyes, network affiliation increases the professional status of the individual members and of the profession as a whole. One provider felt that family day care providers do not get enough credit for the difficult and important work they do. She remarked, "People still see day care providers as mere babysitters. . . I tell people all the time, 'I am not a babysitter.'" When one provider was asked what she felt was the biggest problem facing family day care providers in New York City, she responded: "They need help seeing themselves as professionals—and to stop seeing themselves as little Mickey Mouse housewives . . . [As a provider] you are the CEO of your own company. They need help in making a new image for themselves." Many providers look to their networks for help in strengthening that new professional image.

6

Keys to Network Success

The experiences of the eight New York City networks studied in this evaluation may not necessarily be applicable in other places or to other types of networks, but they shed light on factors that influence the success and viability of family day care networks. Four characteristics, in particular, demonstrate both the value networks have for providers and the community, and the limitations of networks when they stand alone and are poorly funded.

The first characteristic is the popularity of the networks' initial training for providers, compared with the subsequent modest proportion of trainees who go on to become regulated and open their homes for care. The second characteristic concerns the size and scope of the networks. The third is the constant challenge to network viability posed by a lack of stable funding. The fourth is the role that networks play in linking parents who seek care with providers, a role that combines the elements of pragmatic business support with parent education and efforts to change the image of the family day care profession.

Training and Regulation

Networks become most visible in their communities through the family day care training sessions they offer to individuals who are considering opening family day care businesses or to those who have been caring for children informally and want to explore what might be involved in "going public." Virtually all of the networks studied found this training to be immensely popular, perhaps because of its affordability. Those networks charging for courses received $25 or $50 for a nine-week session, while a local college cited by one coordinator offered a course with similar content which carried no college credit but cost over $100 for each of the nine sessions. Most networks, even without advertising the training, were oversubscribed. One network filled a session with 42 people and still had a waiting list of more than 50 names; one that offered training in Spanish had a waiting list of more than 200.

Interest in attending a training course, however, does not necessarily translate into eagerness to become a regulated family day care provider. Often only about half the providers who began the initial training finished it, and a still smaller proportion persevered through the cumbersome regulatory process to open a formal family day care

business. These dwindling numbers were common to virtually all the networks, but the statistics did not worry the coordinators. Several of the experienced coordinators commented that the training helps to screen out individuals who are not well-suited to a career in family day care. Coordinators do not disguise the risky and demanding aspects of family day care work; one commented that she uses training to "weed out" providers whom she believed were in it for the money and not because they loved working with children.

Networks located in the higher-income areas reported that a larger proportion of their trainees became licensed or (more recently) registered than in lower-income areas. This difference points up the fact that it can be costly and difficult to meet the physical requirements and navigate the paperwork associated with entering the regulated system. For instance, regulatory standards require radiator covers that cost $50 each, and health documentation on each person living in the home, which can cost in many neighborhoods $80–$100 per person.

To make matters worse, the extensive application for registration has not been translated into Spanish, and providers from all backgrounds find it intimidating. The coordinators become frustrated when they cannot help an interested provider obtain the tangible resources she needs to get started. One coordinator who had been a provider herself said: "I understand how it feels to want to start a day care or start taking care of kids and to not have the necessary equipment to make things safe for those kids." Yet most coordinators recognized that attending a training course can be valuable even to those attendees who do not become regulated family day care providers. One coordinator in a neighborhood with many unregulated caregivers said of the women who attended her training course, "They learn a lot even though they are not ready to open their home. They said they learn even for their family. This makes me happy."

Size and Scope

Nearly all the coordinators interviewed in the study commented that networks are most effective when they are neighborhood-based and relatively small (30 to 35 providers, ideally). The major reason for their preference for small networks was that they allow closer personal relationships to develop, both among providers and between the providers and the coordinators. As one coordinator explained, if the network becomes too large and "you don't have control over it, the network can lose a lot, lose the personal touch." One administrator wanted to keep the network small and "hands on" in part because she believes that training happens best in small groups, where people grow together over time. Several networks had to turn away providers rather than dilute the level of interaction between the network and each provider. A coordinator stated bluntly: "I am not into quantity here, I really am more into quality."

This same thinking led coordinators and agency administrators to stress the value of networks that are community-based and bound geographically. The coordinator of one

local network commented that it is "important that the network speak the providers' language" and that you "keep in touch with them and that they have access to you—that you are close to them." Long distances, especially in residential areas not well-served by public transportation, made home visits time-consuming and costly and reduced the willingness of providers to attend meetings in the evenings. Several of the networks studied became quite dispersed for various reasons, and an administrator described the management of such a network as "a chore." The coordinator of a large and far-flung network explained her preference for a more locally bounded network this way: "There's something nice about knowing that your service center is only a few minutes away, that you can always stop in, and that communication is a little more intimate."

The importance of community rootedness can also be seen in the providers' reservations about participating in city wide events and organizations. New York City has a family day care organization known as the Citywide Association for Family Day Care, which holds monthly meetings and annual conferences and keeps providers up-to-date on policy developments and professional issues. Several coordinators' descriptions of their providers' participation in the association were similar. They explained that while many providers became members, they seldom went to the meetings. They relied instead on the coordinator to bring back relevant information to them. Going out to a meeting in the evening or on Saturday can be a hardship for any provider working 10–12-hour days, five days a week with children, and many were not comfortable leaving their neighborhoods to attend meetings in other areas. Spanish-speaking providers are even more reluctant to attend mainstream events which are nearly always conducted in English. Even so, one group of forty Latino network members traveled to the state capitol together one day to join in day care lobbying. Their coordinator said that they enjoyed the trip, although most of the providers were "scared" beforehand that they would not understand or feel included because of the language barrier. These same providers have requested that their network coordinator handle referral calls from citywide resource and referral agencies. They prefer that "one person talk to them in their own language and explain to them at their level. That way they can best decide if they want to participate or not." This is another brokering function the networks serve—linking providers to the wider child care community.

Stable Funding

It is a truism to point out that even dedicated service providers and committed, community-oriented agencies cannot provide services without secure funding. Covering the costs of managing a network (with training, workshops and support meetings, visits, mailings, and limited parent referrals) is primarily a matter of paying the modest salaries of one or two staff members: a coordinator from the community and, at best, an assistant. Nevertheless, many of the eight networks studied had difficulty maintaining the level of funding required for these minimal services. At the time of the interviews, two networks had virtually no funds for salaries and two others could pay only a small portion of one staff

person's time. An administrator spoke of the frustration over the difficulty in finding funds for a successful network: "We are doing a great job, it's just that our coordinator is only working part-time. That's what gets me really upset at times, especially with the phone ringing day in and day out. Weekends people are still calling. Do they think we live here?"

The unpredictability of network funding adds to the problem. One network anticipated receiving state funds to offer an expanded training program, and they located a part-time bilingual consultant to hold sessions in Spanish. However, over a year passed before the network received a contract with an approved budget. This left the consultant and the network in limbo. When one of the job training programs lacked funding to cover the coordinator's salary, the organization considered closing the network and discontinued training sessions for new providers: "We felt that to continue training, and then have the providers waiting to provide services [would not be good]. It would be better to wait and see."

Unfortunately, it is easier to dismantle a network than to reconstitute it. For that reason, several coordinators have encouraged the providers in their network to take more control of the network's activities, by organizing committees, electing officers, and holding their own fundraising events. One explained that she has pushed this approach "so that they don't all depend on me to be there for them. I want to get them out of that habit and to realize that the network is them not me. Get them in the habit of doing things for themselves." She followed by saying, "I can see them doing bigger and better things with the network." At the very least, networks in which the providers had begun to assume these responsibilities have had a better chance of surviving if a funding gap leaves them without a coordinator. However, a network run by a committee of providers who are caring for children five days a week can only offer a fraction of the valuable supports provided by networks with a full-time paid coordinator.

Educating Parents and the Public

The networks, through their very existence, have influenced the public perception of family day care in their communities. Of course, the more directly the network facilitates the relationship between parents and providers through referrals and help to resolve conflicts, the more opportunity the network coordinator has to shape parents' attitudes toward home-based child care. Many parents have high expectations of providers because of the similarities between family day care and parental care. One coordinator commented that parents look for a provider who is as good a parent as he or she is, whose home is as nice or nicer than the family's own, and who also has a pleasant personality. Another coordinator explained, "We try to educate a parent on what to look for in a home, and educate a provider on what to provide and what parents will be looking for." By working with both parties, the coordinators sometimes opened the parents' minds to new possibilities, and they helped the providers to think of themselves as professional business-owners, with both rights and responsibilities in their interactions with parents.

The importance of the credibility that providers derived from network membership increased substantially, in the eyes of providers and coordinators alike, when the New York State regulatory system moved from mandatory inspections to a voluntary registration system. As one coordinator put it, in a voluntary system, "Whoever wants to do it can just fill in the paperwork," and another said, "It's just a matter of who lies well." Although the providers tell parents they are trained and are visited by the network, one coordinator reminded parents that they had the responsibility for judging the care. "Even [though we are] a network, you can't rely on us to monitor. . .I do training, and I do a home visit, but I don't do an investigation." She urged parents to interview providers, check references, and rely on their instincts in evaluating whether a provider's home would meet their needs. All were sympathetic to parents who tend to mistrust care in private homes, but they encouraged parents to approach family day care with an open mind.

Many network coordinators went through a similar process convincing their anxious agency heads or boards about the safety or quality of the care offered in "free-standing" homes. One board was "uneasy" that the agency would be perceived as liable for problems that might occur in the homes. The board urged the network coordinator to clarify to parents that they are making their own decision and that the network does not accept responsibility for the care. Another program director came to terms with his own ambivalence: "But I like the family day care network. It still makes me nervous, but you know you can't be everywhere at the same time." It was clear that the networks met pressing needs in the community not only by developing child care to serve the community's families, but by helping providers establish themselves in independent businesses. One provider noted: "I feel very executive when I go there." One agency's director called the network his organization's "most important achievement," recognizing this contribution to the community's strength.

It was not possible for this study to conduct enough interviews to learn whether the networks' activities affected the public's perception of family day care. Presenting family day care in a positive light is sometimes an uphill battle: as one provider said: "You hear so many bad stories on television; you never hear any of the good ones." The networks work hard to ensure that the good stories are also be told. One of the coordinators made this measured judgment: "I believe in 1993 that people know more about family day care than in the 1980s. It's going there, slowly it's going there. People know more."

7

Conclusion

Across the United States, family day care is changing—in cities, suburbs, and rural areas. It is becoming more visible, more accepted, and more professional. The relationships between parents and home-based caregivers are becoming more formal for a variety of reasons—because they are finding one another through a child care referral service, because the parent asks for the provider's social security or taxpayer identification number to get child care tax credits, or because documents have to be submitted to a public agency to fund the child care. In these situations, providers have to offer parents different types of reassurances than were given in earlier times—by the neighborhood lady who "took in" children during the day.

As state policies on the public regulation of family day care shift—tightening in some states, loosening in others—providers will look more and more often to their own peers to find solutions to the problems they face as independent child care businesses, to set quality standards, to provide accountability, and to demonstrate their professionalism. Policymakers, professionals, and advocates around the country are eager to help them and to learn how to best give providers support and oversight to ensure that all children in home-based child care settings receive safe, developmentally appropriate care.

The experiences of the eight family day care networks described in this report indicate that community-based networks are a promising mechanism for assisting new and experienced providers. They offer initial and ongoing training, and they bring providers together to support each other and make their voices heard. For the relatively modest cost of one or two staff salaries and some office supplies, a network can train a hundred or more new providers yearly, and can serve thirty or more providers as an ongoing source of information and support—through meetings, home visits, parent referrals, and links with professional and advocacy organizations. Networks can offer providers the support that leaders of the California Child Care Initiatives Project called for as a means to promote retention and quality in family day care, "a dependable, stable, professional partner."

The effectiveness of networks derives in part from the fact that they are groups that providers join voluntarily. Networks interact as peers with providers, listening to them as well as sharing information with them. Most providers are entrepreneurs who operate independently, and that trait makes many of them impatient with agency-operated

systems that direct and control their work. Provider associations, on the other hand, while democratically controlled, may not offer the services their members seek beyond peer support and training—home visits, parent referrals, and credibility. Community-based family day care networks work at a level midway between these other two models, with staff who are paid for the time it takes to gather information, organize meetings, and maintain personal contact with providers through the telephone and home visits. Networks also help parents, community members, and policymakers understand what family day care is now and could be, promoting their conviction that family day care is a profession.

In this New York City project, networks were established successfully in various types of organizations, including a number of groups that had no prior experience with child care. These organizations benefited from the child care expertise that went into the network development model designed by Child Care, Inc., and from the consultation and guidance that the child care experts offered to the network coordinators as they launched their networks. In turn, the community connections of the sponsoring organizations contributed to the strength and vitality of the networks, especially the neighborhood-based networks. Both ingredients—child care expertise and neighborhood credibility—appear to be essential to the development of successful networks.

The administrative requirements for networks are modest. Most require only office and meeting space, and salaries for a coordinator and perhaps an assistant. However, these operating costs are continuous. Consequently, reliable funding is critical to assuring the stability and success of the networks. The dilemma faced by groups or individuals who operate or help establish networks is that practically no funding for family day care is provided in a way that supports ongoing administrative functions, like a coordinator's salary. Child care subsidy payments, for example, barely cover the hourly cost of providing the care, and those payments typically go directly to the provider. Employers have contributed funds increasingly to help their employees find child care, but this type of funding pays predominantly for referral services or for developing new child care services. Public funds, offered to improve the quality of child care, are usually targeted toward recruitment or training activities that do not allow for the core support of existing providers. Grants from the private sector may cover a family day care network's operating costs for a few years, but grant support in most cases is time-limited. Short-term funding is better than none, but it does not constitute the needed investment in the child care delivery system.

The need to establish sources of ongoing support for child care providers has become increasingly evident in the United States. After a wave of family day care recruitment efforts were launched in the mid-1980s, leaders in the profession recognized that it is futile to continually recruit and train new providers while existing providers must close their businesses and leave the child care field after only a year or two of operation. A capable, reliable child care delivery system must be built on experience. In addition to helping new individuals enter the field, the system must retain experienced providers and support them as they broaden and deepen their skills.

Family day care networks perform both of these functions for the communities they serve. They help individuals learn about family day care, decide whether they want to try to offer it, make necessary adaptations to their homes so they can become licensed, and receive training so they are well-prepared for the work they have chosen to do. In addition, and perhaps more importantly, these same networks provide an ongoing support group through which experienced providers can share their frustrations and achievements, and they reach out to providers with resources, information, and assistance appropriate to each individual's situation.

Community-based networks are well-positioned to build the capacity of local family day care providers to offer excellent care for children. It is the responsibility of the funding community to devise a way to give networks the continuous financial support required to do what they do so well.

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Networks Participating in the Evaluation

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Contact: Yves Vilus or Karen Shaw

Flatbush-Haitian Center
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Contact: Jean C. Belizaire or Lydia Cruz

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Queens Child Care Network
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